

AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): Douglas J. Hilton, et al.

Docket No.

10857Z

Serial No.
09/037,657Filing Date
March 10, 1998Examiner
F. HamudGroup Art Unit
1646

Invention: AN OXYGENATED HAEMOPOIETIN RECEPTOR AND GENETIC SEQUENCES ENCODING SAME



TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

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CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	22 -	22 =	0	x \$18.00	\$0.00
INDEP. CLAIMS	10 -	10 =	0	x \$84.00	\$0.00
Multiple Dependent Claims (check if applicable)	<input type="checkbox"/>				\$0.00
		TOTAL ADDITIONAL FEE FOR THIS AMENDMENT			\$0.00

No additional fee is required for amendment.

Please charge Deposit Account No. in the amount of
A duplicate copy of this sheet is enclosed.

A check in the amount of to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-1013/SSMP
A duplicate copy of this sheet is enclosed.

Any additional filing fees required under 37 C.F.R. 1.16.

Any patent application processing fees under 37 CFR 1.17.

Signature

Dated: May 28, 2002

Frank S. DiGilio
Registration No. 31,346
Scully, Scott, Murphy & Presser
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Garden City, New York 11530
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I certify that this document and fee is being deposited on May 28, 2002 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Signature of Person Mailing Correspondence

Michelle Mustafa

Typed or Printed Name of Person Mailing Correspondence

CC:

is hereby requested to [] respond to the Official Action mailed: _____;

[] file a Notice of Appeal in response to a final rejection mailed:

_____;

[] file an Appeal Brief now due: _____;

[x] other (specify): To file RCE Application (Notice of Appeal filed
February 28, 2002)

The requisite fee pursuant to 37 C.F.R. §1.17 is:

[x] enclosed by check - \$110.00

[] to be charged to Deposit Account No. 19-1013/SSMP. A duplicate
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[x] The Commissioner is hereby authorized to charge payment of
any fees associated with this communication or credit any
overpayment to Deposit Account No. 19-1013/SSMP. A duplicate
copy of this sheet is attached.

Respectfully submitted,


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FSD/XZ:ab